

**Alabama Medicaid Agency
Pharmacy and Therapeutics Committee**

**Date of Meeting: Wednesday May 15, 2013
Preferred Drug List Final**

AHFS Drug Class Re-reviewed: HYPOTENSIVE AGENTS

Subclasses Reviewed

- Central Alpha-Agonists
- Direct Vasodilators
- Peripheral Adrenergic Inhibitors
- Hypotensive Agents, Miscellaneous

AHFS Drug Class Re-reviewed: ALPHA-ADRENERGIC BLOCKING AGENTS

AHFS Drug Class Re-reviewed: BETA-ADRENERGIC BLOCKING AGENTS

AHFS Drug Class Re-reviewed: CALCIUM-CHANNEL BLOCKING AGENTS

Subclasses Reviewed

- Dihydropyridines
- Calcium-Channel Blocking Agents, Miscellaneous

**AHFS Drug Class Re-reviewed: RENIN-ANGIOTENSIN-ALDOSTERONE
SYSTEM INHIBITORS**

Subclasses Reviewed

- Angiotensin-Converting Enzyme Inhibitors
- Angiotensin II Receptor Antagonists
- Mineralocorticoid (Aldosterone) Receptor Antagonists
- Renin Inhibitors

AHFS Drug Class Re-reviewed: DIURETICS

Subclasses Reviewed

- Loop Diuretics
- Potassium-Sparing Diuretics
- Thiazide Diuretics
- Thiazide-like Diuretics
- Vasopressin Antagonists
- Diuretics, Miscellaneous

*Denotes generic available in at least one dosage form or strength
Drug name denotes all dosage forms and strengths unless noted

Central Alpha-Agonists

PREFERRED GENERIC/OTC

All covered products

PREFERRED BRAND

NONE

NON-PREFERRED BRAND or PA GENERIC

CATAPRES*
CATAPRES-TTS*
TENEX*

*Denotes generic available in at least one dosage form or strength
Drug name denotes all dosage forms and strengths unless noted

Direct Vasodilators

PREFERRED GENERIC/OTC

All covered products

PREFERRED BRAND

NONE

NON-PREFERRED BRAND or PA GENERIC

BIDIL
PROGLYCEM

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Drug name denotes all dosage forms and strengths unless noted

Peripheral Adrenergic Inhibitors

PREFERRED GENERIC/OTC

All covered products

PREFERRED BRAND

NONE

NON-PREFERRED BRAND or PA GENERIC

NONE

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Drug name denotes all dosage forms and strengths unless noted

Hypotensive Agents, Miscellaneous

PREFERRED
GENERIC/OTC

All covered products

PREFERRED
BRAND

NONE

NON-PREFERRED
BRAND or PA GENERIC

NONE

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Alpha-Adrenergic Blocking Agents

PREFERRED GENERIC/OTC

All covered products

PREFERRED BRAND

NONE

NON-PREFERRED BRAND or PA GENERIC

CARDURA*
CARDURA XL
MINIPRESS*

*Denotes generic available in at least one dosage form or strength
Drug name denotes all dosage forms and strengths unless noted

Beta-Adrenergic Blocking Agents

PREFERRED GENERIC/OTC

All covered products

PREFERRED BRAND

NONE

NON-PREFERRED BRAND or PA GENERIC

BETAPACE*
BETAPACE AF*
BYSTOLIC
COREG*
COREG CR
CORGARD*
CORZIDE*
DUTOPROL
INDERAL LA*
INNOPRAN XL
KERLONE*
LEVATOL
LOPRESSOR*
LOPRESSOR
HCT*
SECTRAL*
TENORETIC*
TENORMIN*
TOPROL XL*
TRANDATE*
ZEBETA*
ZIAC*

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Dihydropyridines

PREFERRED GENERIC/OTC

All covered products

PREFERRED BRAND

NONE

NON-PREFERRED BRAND or PA GENERIC

ADALAT CC*

AZOR

CARDENE IV*

CARDENE SR

DYNACIRC CR

EXFORGE

EXFORGE HCT

LOTREL*

NORVASC*

PROCARDIA*

PROCARDIA XL*

SULAR*

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Calcium-Channel Blocking Agents, Miscellaneous

PREFERRED GENERIC/OTC

All covered products

PREFERRED BRAND

NONE

NON-PREFERRED BRAND or PA GENERIC

CALAN*
CALAN SR*
CARDIZEM*
CARDIZEM CD*
CARDIZEM LA
MATZIM LA
TIAZAC*
VERELAN*
VERELAN PM*

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Angiotensin-Converting Enzyme Inhibitors

PREFERRED GENERIC/OTC

All covered products

PREFERRED BRAND

NONE

NON-PREFERRED BRAND or PA GENERIC

ACCUPRIL*
ACCURETIC*
ALTACE*
LOTENSIN*
LOTENSIN HCT*
MAVIK*
PRINIVIL*
PRINZIDE*
TARKA
UNIRETIC*
UNIVASC*
VASERETIC*
VASOTEC*
ZESTORETIC*
ZESTRIL*

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Angiotensin II Receptor Antagonists

<u>PREFERRED GENERIC/OTC</u>	<u>PREFERRED BRAND</u>	<u>NON-PREFERRED BRAND or PA GENERIC</u>
All covered products	NONE	ATACAND ATACAND HCT* AVALIDE* AVAPRO* BENICAR BENICAR HCT COZAAR* DIOVAN DIOVAN HCT* EDARBI EDARBYCLOR HYZAAR* MICARDIS MICARDIS HCT TEVETEN* TEVETEN HCT TRIBENZOR TWYNSTA

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 Drug name denotes all dosage forms and strengths unless noted

Mineralocorticoid (Aldosterone) Receptor Antagonists

PREFERRED GENERIC/OTC

All covered products

PREFERRED BRAND

NONE

NON-PREFERRED BRAND or PA GENERIC

ALDACTAZIDE*

ALDACTONE*

INSPIRA*

*Denotes generic available in at least one dosage form or strength
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Renin Inhibitors

PREFERRED GENERIC/OTC

All covered products

PREFERRED BRAND

NONE

NON-PREFERRED BRAND or PA GENERIC

AMTURNIDE
TEKAMLO
TEKTURNA
TEKTURNA HCT
VALTURNA

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Loop Diuretics

PREFERRED GENERIC/OTC

All covered products

PREFERRED BRAND

NONE

NON-PREFERRED BRAND or PA GENERIC

DEMADEX*
EDECRIN
LASIX*

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Potassium-Sparing Diuretics

PREFERRED GENERIC/OTC

All covered products

PREFERRED BRAND

NONE

NON-PREFERRED BRAND or PA GENERIC

DYAZIDE*

MAXZIDE*

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Thiazide Diuretics

PREFERRED GENERIC/OTC

All covered products

PREFERRED BRAND

NONE

NON-PREFERRED BRAND or PA GENERIC

DIURIL
MICROZIDE*

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Thiazide-like Diuretics

PREFERRED GENERIC/OTC

All covered products

PREFERRED BRAND

NONE

NON-PREFERRED BRAND or PA GENERIC

ZAROXOLYN*

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Vasopressin Antagonists

PREFERRED GENERIC/OTC

All covered products

PREFERRED BRAND

NONE

NON-PREFERRED BRAND or PA GENERIC

SAMSCA

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Diuretics, Miscellaneous

PREFERRED GENERIC/OTC

All covered products

PREFERRED BRAND

NONE

NON-PREFERRED BRAND or PA GENERIC

NONE

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